

PART B - FEE(S) TRANSMITTAL

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909 7590 08/25/2011
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(Depositor's name)

(Signature)

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/578,593 | 05/08/2006 | Philip Thonhauser | 085523-0381114 | 1729 |

TITLE OF INVENTION: CLEANING DISINFECTION AND INDICATOR AGENT

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|---------------|---------------------|----------------------|------------------|------------|
| nonprovisional | YES | \$755 | \$300 | \$0 | \$1055 | 11/25/2011 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|--------------------|----------|----------------|
| DEO, DUY VU NGUYEN | 1713 | 252-186100 |

| | | |
|--|--|------------------------------|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). | 2. For printing on the patent front page, list | 1. <u>Pillsbury Winthrop</u> |
| <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, | 2. <u>Shaw Pittman LLP</u> |
| <input type="checkbox"/> "Fee Address" indication (or "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | 3. _____ |

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

THONHAUSER GMBH

PERCHTOLDSDORF, AUSTRIA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

| | |
|--|---|
| 4a. The following fee(s) are submitted: | 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) |
| <input checked="" type="checkbox"/> Issue Fee | <input type="checkbox"/> A check is enclosed. |
| <input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted) | <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. |
| <input checked="" type="checkbox"/> Advance Order - # of Copies 3 | <input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 03-3975 (enclose an extra copy of this form). |

| | | |
|--|--|---|
| 5. Change in Entity Status (from status indicated above) | <input type="checkbox"/> a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. | <input type="checkbox"/> b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). |
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Authorized Signature /Raj S. Dave/

Date November 22, 2011

Typed or printed name Raj S. Dave

Registration No. 42,465

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